61A200 (10-03)

Commonwealth of Kentucky REVENUE CABINET

Department of Property Valuation Division of State Valuation Frankfort, KY 40620

HIGHER KY

PUBLIC SERVICE COMPANY PROPERTY TAX RETURN

For Year Ending December 31, 2003

➤ See Instructions

This return must be filed with the Department of Property Valuation between January 1 and April 30, 2004.

APRIL 2004												
s	М	т	w	т	F	s						
				1	2	3						
4	5	6	7	8	9	10						
11	12	13	14			17						
18	19	20	21	22	2	24						
25	26	27	28	29	3()						

				1			18 19 20 2 25 26 27 2	1 22 30 24 8 29 30 24	
				Type of	Public Service Co	mpany			
				☐ Forei ☐ Corp	Ownership gn oration □ Partner rporation □ LLC		vidual		
Taxpayer Name 1							LEAV	E BLANK	
Name 2							GNC		
Address 1		Postmark							
Address 2							T OSWINAN		
City		State	ZIP Code		FEIN				
Contact Person		<u> </u>					Preaudit		
Phone	Fax			E-Mail			Preaudit		
Tax Agent Name 1	()							
Name 2 Address 1								Taxpayers completing this return must complete the agency portion in order to maintain an agent status.	
Address 2								ompleting this	
City State ZIP Code			ZIP Code	FEIN			return must have a current power of attorney		
Contact Person		1	1		<u>I</u>		on file wit	h the Kentucky Cabinet or	
Phone ()	Fax)		E-Mail			include on	ie.	
Which address above is to be used for	\ r mailing		ment notice, tax	 hills and c	ertifications?				
☐ Taxpayer Address	g	□ Other	· ·						
☐ Tax Agent Address Do you want a public service compan If no, you must obtain your tax return vi				t year?	□ Yes	□ No			
Is your company affiliated with any of If yes, submit organizational chart and i	ther com	panies? (I	Parent/Subs)	nd 136 140	☐ Yes	□ No			
Has an independent authority or ager If yes, submit a copy of the appraisal re	ncy value	d your pro	operty?	nu 150.140	□ Yes	□ No			
Has the company or a fraction thereo If yes, complete the appropriate informa	f sold, be	en purcha	sed or merged w			□ No	packet.		
Has your company filed bankruptcy of the district in which the	within the	e last thre	e years?		□ Yes	□ No	•		
Do you intend to claim the Coal Incer If yes, provide a copy of the Coal Incen			ificate (KRS 1/1)	0405)	□ Yes	□ No			
I declare under penalties of perjury that this and belief is a true, correct and complete r	s return, inc				atements, has been exa	mined by me a	nd to the best o	f my knowledge	
Signature	3				Title		-	Date	